



### General

### Title

Health plan members' experiences: percentage of parents/caretakers of health plan members who reported whether they received assistance with coordination of care and services for their children with chronic conditions.

### Source(s)

National Committee for Quality Assurance (NCQA). HEDIS 2016: Healthcare Effectiveness Data and Information Set. Vol. 1, narrative. Washington (DC): National Committee for Quality Assurance (NCQA); 2015. various p.

National Committee for Quality Assurance (NCQA). HEDIS 2016: Healthcare Effectiveness Data and Information Set. Vol. 2, technical specifications for health plans. Washington (DC): National Committee for Quality Assurance (NCQA); 2015. various p.

National Committee for Quality Assurance (NCQA). HEDIS 2016: Healthcare Effectiveness Data and Information Set. Vol. 3, specifications for survey measures. Washington (DC): National Committee for Quality Assurance (NCQA); 2015. various p.

# Measure Domain

### Primary Measure Domain

Clinical Quality Measures: Patient Experience

### Secondary Measure Domain

Clinical Quality Measure: Access

# **Brief Abstract**

# Description

The CAHPS Health Plan Survey 5.0H, Child Version provides information on parents'/caretakers' experience with their child's health plan for the population of children with chronic conditions (CCC).

Results include the same ratings, composites and individual question summary rates as those reported for the CAHPS Health Plan Survey 5.0H, Child Version. In addition, three CCC composites summarize

satisfaction with basic components of care essential for successful treatment, management and support of children with chronic conditions.

Access to Specialized Services

Family Centered Care: Personal Doctor Who Knows Child Coordination of Care for Children with Chronic Conditions

Item-specific question summary rates are reported for each composite question. Question summary rates are also reported individually for two items summarizing the following concepts:

Access to Prescription Medicines

Family Centered Care: Getting Needed Information

For this "Coordination of Care for Children with Chronic Conditions" measure, parents/caretakers of children with chronic conditions indicate whether ("Yes," "No") they got the help they needed from their child's doctors or other health providers in contacting their child's school or day care and whether ("Yes," "No") anyone from their child's health plan, doctor's office, or clinic helped them coordinate their child's care among these different providers or services in the last 6 months. The "Coordination of Care for Children with Chronic Conditions" composite measure is based on two questions in the CAHPS Health Plan Survey 5.0H, Child Version.

### Rationale

The National Committee for Quality Assurance's (NCQA's) Committee on Performance Measurement (CPM) has long felt that consumer experience with health care is a critical component of quality of care, that experience affects care outcome—and that experience is itself a measure of outcome. Survey results give health plans the opportunity for continuous improvement in member care.

### Evidence for Rationale

National Committee for Quality Assurance (NCQA). HEDIS 2016: Healthcare Effectiveness Data and Information Set. Vol. 3, specifications for survey measures. Washington (DC): National Committee for Quality Assurance (NCQA); 2015. various p.

# Primary Health Components

Health care; member experiences; chronic conditions; coordination of care; children

# **Denominator Description**

Eligible members with chronic conditions age 17 years and younger whose parent/caretaker answered the "Coordination of Care for Children with Chronic Conditions" questions on the CAHPS Health Plan Survey 5.0H, Child Version (see the related "Denominator Inclusions/Exclusions" field)

# Numerator Description

The number of "Yes" and "No" responses on the "Coordination of Care for Children with Chronic Conditions" questions (see the related "Numerator Inclusions/Exclusions" field)

# Evidence Supporting the Measure

### Type of Evidence Supporting the Criterion of Quality for the Measure

A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences

### Additional Information Supporting Need for the Measure

Unspecified

### **Extent of Measure Testing**

All HEDIS measures undergo systematic assessment of face validity with review by measurement advisory panels, expert panels, a formal public comment process and approval by the National Committee for Quality Assurance's (NCQA's) Committee on Performance Measurement and Board of Directors. Where applicable, measures also are assessed for construct validity using the Pearson correlation test. All measures undergo formal reliability testing of the performance measure score using beta-binomial statistical analysis.

### Evidence for Extent of Measure Testing

Rehm B. (Assistant Vice President, Performance Measurement, National Committee for Quality Assurance, Washington, DC). Personal communication. 2015 Mar 16. 1 p.

### State of Use of the Measure

### State of Use

Current routine use

### Current Use

not defined yet

# Application of the Measure in its Current Use

### Measurement Setting

Managed Care Plans

Transition

# Type of Care Coordination

Coordination across provider teams/sites

# Professionals Involved in Delivery of Health Services

### Least Aggregated Level of Services Delivery Addressed

Single Health Care Delivery or Public Health Organizations

### Statement of Acceptable Minimum Sample Size

Specified

### **Target Population Age**

Age less than or equal to 17 years

### **Target Population Gender**

Either male or female

# National Strategy for Quality Improvement in Health Care

### National Quality Strategy Aim

Better Care

# National Quality Strategy Priority

Effective Communication and Care Coordination Health and Well-being of Communities Person- and Family-centered Care

# Institute of Medicine (IOM) National Health Care Quality Report Categories

### IOM Care Need

End of Life Care

Getting Better

Living with Illness

Staying Healthy

### **IOM Domain**

Patient-centeredness

### Data Collection for the Measure

### Case Finding Period

The measurement year

### **Denominator Sampling Frame**

Enrollees or beneficiaries

### Denominator (Index) Event or Characteristic

Clinical Condition

Patient/Individual (Consumer) Characteristic

### **Denominator Time Window**

not defined yet

### **Denominator Inclusions/Exclusions**

#### Inclusions

Eligible members with chronic conditions age 17 years and younger whose parent/caretaker answered the "Coordination of Care for Children with Chronic Conditions" questions on the CAHPS Health Plan Survey 5.0H, Child Version. Include nonresponses.

#### Note:

Eligible Population: Members age 17 years and younger as of December 31 of the measurement year, who were continuously enrolled during the measurement year (commercial) or the last 6 months of the measurement year (Medicaid), and currently enrolled at the time the survey is completed.

Allowable Gap: No more than one gap in enrollment of up to 45 days during the measurement year. To determine continuous enrollment for a Medicaid member for whom enrollment is verified monthly, the member may not have had more than a 1-month gap in coverage.

Health plans use transaction data or other administrative databases to assign a prescreen status code to each child member in the CAHPS child survey sample frame data file. The prescreen status code identifies a set of children who are more likely to have a chronic condition. Refer to the original measure documentation for additional information.

Children with Chronic Conditions (CCC) population: All children identified as having a chronic condition, as defined by the member's responses to the CCC survey-based screening tool. Refer to Table CCC-7 in the original measure documentation.

Nonresponses:

Incomplete

Refusal

After maximum attempts

Bad address

Bad address and nonworking/unlisted phone number or member is unknown at the dialed phone number

#### Exclusions

Members assigned one of the following final disposition codes of "Ineligible":

Deceased

Does not meet eligible population criteria

Language barrier

Removed from sample during deduplication

### Exclusions/Exceptions

not defined yet

### Numerator Inclusions/Exclusions

Inclusions

The number of "Yes" and "No" responses on the "Coordination of Care for Children with Chronic Conditions" questions

From the responses, composite global proportions and a composite global proportion variance are calculated, as well as item-specific question summary rates for each composite question.

Note: A questionnaire must have the final disposition code of "Complete and Valid Survey" for inclusion in the survey results calculations.

Refer to the original measure documentation for additional details.

Exclusions

Unspecified

### Numerator Search Strategy

Fixed time period or point in time

### **Data Source**

Administrative clinical data

Patient/Individual survey

### Type of Health State

Does not apply to this measure

### Instruments Used and/or Associated with the Measure

CAHPS Health Plan Survey 5.0H, Child Questionnaire

# Computation of the Measure

### Measure Specifies Disaggregation

Does not apply to this measure

### Scoring

Composite/Scale

Rate/Proportion

# Interpretation of Score

Desired value is a higher score

# Allowance for Patient or Population Factors

### Description of Allowance for Patient or Population Factors

This measure requires that results are reported separately for the commercial and Medicaid product lines.

### Standard of Comparison

not defined yet

# **Identifying Information**

### **Original Title**

Coordination of care for children with chronic conditions.

### Measure Collection Name

HEDIS 2016: Health Plan Collection

### Measure Set Name

Experience of Care

### Measure Subset Name

CAHPS Health Plan Survey 5.0H, Child Version - Children with Chronic Conditions

### Submitter

National Committee for Quality Assurance - Health Care Accreditation Organization

### Developer

National Committee for Quality Assurance - Health Care Accreditation Organization

# Funding Source(s)

Unspecified

# Composition of the Group that Developed the Measure

National Committee for Quality Assurance's (NCQA's) Measurement Advisory Panels (MAPs) are composed of clinical and research experts with an understanding of quality performance measurement in the particular clinical content areas.

### Financial Disclosures/Other Potential Conflicts of Interest

In order to fulfill National Committee for Quality Assurance's (NCQA's) mission and vision of improving health care quality through measurement, transparency and accountability, all participants in NCQA's expert panels are required to disclose potential conflicts of interest prior to their participation. The goal of this Conflict Policy is to ensure that decisions which impact development of NCQA's products and services are made as objectively as possible, without improper bias or influence.

### Adaptation

This measure was adapted from the CAHPS 5.0 Health Plan Survey (Child Questionnaire).

### Date of Most Current Version in NQMC

2015 Oct

### Measure Maintenance

Unspecified

### Date of Next Anticipated Revision

Unspecified

### Measure Status

This is the current release of the measure.

This measure updates previous versions:

National Committee for Quality Assurance (NCQA). HEDIS 2015: Healthcare Effectiveness Data and Information Set. Vol. 1, narrative. Washington (DC): National Committee for Quality Assurance (NCQA); 2014. various p.

National Committee for Quality Assurance (NCQA). HEDIS 2015: Healthcare Effectiveness Data and Information Set. Vol. 2, technical specifications for health plans. Washington (DC): National Committee for Quality Assurance (NCQA); 2014. various p.

National Committee for Quality Assurance (NCQA). HEDIS 2015: Healthcare Effectiveness Data and Information Set. Vol. 3, specifications for survey measures. Washington (DC): National Committee for Quality Assurance (NCQA); 2014. various p.

# Measure Availability

Source	available	for purchase	from t	the	National	Committee	for Quality	Measurement	(NCQA)	Web	site

For more information, conta	act NCQA at 1100 1	l3th Street,	NW,	Suite 1000	), Washington	n, DC 20005;	Phone
202-955-3500: Fax: 202-95	55-3599: Web site:	www.ncga.d	ora				

### Companion Documents

The following is available:

National Committee for Quality Assurance (NCQA). HEDIS 2016: Healthcare Effectiveness Data and Information Set. Vol. 2, technical update. Washington (DC): National Committee for Quality Assurance (NCQA); 2015 Oct 1. 12 p.

For more inforn	nation, contact	the Natio	nal Comm	nittee for	Quality	Assurance	(NCQA)	at 1100	13th	Street,
NW, Suite 1000	), Washington,	DC 20005	; Phone:	202-955-	3500; Fa	ax: 202-95	5-3599;	Web site	e:	
www ncga org										

# **NQMC Status**

This NQMC summary was completed by ECRI on April 9, 2007. The information was not verified by the measure developer.

This NQMC summary was updated by ECRI Institute on March 17, 2008. The information was verified by the measure developer on April 24, 2008.

This NQMC summary was updated by ECRI Institute on February 6, 2009. The information was verified by the measure developer on May 12, 2009.

This NQMC summary was updated by ECRI Institute on April 30, 2010, August 4, 2011, November 9, 2012, August 1, 2013, April 8, 2014, May 12, 2015, and again on March 15, 2016.

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# Production

### Source(s)

National Committee for Quality Assurance (NCQA). HEDIS 2016: Healthcare Effectiveness Data and Information Set. Vol. 1, narrative. Washington (DC): National Committee for Quality Assurance (NCQA); 2015. various p.

Information Set. Vol. 2, technical specifications for health plans. Washington (DC): National Committee for Quality Assurance (NCQA); 2015. various p.

National Committee for Quality Assurance (NCQA). HEDIS 2016: Healthcare Effectiveness Data and Information Set. Vol. 3, specifications for survey measures. Washington (DC): National Committee for Quality Assurance (NCQA); 2015. various p.

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